Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF PENNSYLVANIA	_	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:	1	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Todd First name  M Middle name  Smith Last name and Suffix (Sr., Jr., II, III)	F 	Ann First name  M Middle name  Smith Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		_	Ann Auxer Ann Deimler
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5154	)	xxx-xx-2602

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	608 N Market St	If Debtor 2 lives at a different address:
		Liverpool, PA 17045  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Perry	· ·
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		PO Box 335 Liverpool, PA 17045	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 1 Todd M Smith otor 2 Ann M Smith					Case r	number (if known)	
Par	t 2: Tell the Court About	our Bank	ruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check on	e. (For a b	orief description of each, see go to the top of page 1 and			C. § 342(b) for Individu	uals Filing for Bankruptcy
	choosing to file under	□ Chapt	ter 7					
		☐ Chapt	ter 11					
		☐ Chapt	ter 12					
		■ Chapt	ter 13					
8.	How you will pay the fee	abo ord a p	out how yo er. If your re-printed		are paying payment on	the fee yourself, your behalf, you	you may pay with cash r attorney may pay with	n, cashier's check, or money on a credit card or check with
				the fee in installments. If ye in Installments (Official Fo		e this option, sign	and attach the Applica	ation for individuals to Pay
		but app	is not required is not required in the second in the secon	t my fee be waived (You m uired to, waive your fee, and ur family size and you are un on to Have the Chapter 7 Fili	may do so able to pay	only if your incom the fee in install	me is less than 150% oments). If you choose t	of the official poverty line that this option, you must fill out
9.	Have you filed for	□ No.						
	bankruptcy within the last 8 years?	Yes.						
	lact o youro.	_ 100.	District	Middle District of Pennsylvania	When	1/20/12	Case number	1:12-00302
			District		— When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	
			District	-	When		Case number, if	
			Debtor		\A/I= = =		Relationship to y	
			District		When		Case number, if	known
11.	Do you rent your residence?	■ No.	Go to li	ine 12.				
	. Coluction .	☐ Yes.	Has yo	ur landlord obtained an evic	tion judgm	ent against you a	nd do you want to stay	in your residence?
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	nt About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this

	tor 1 Todd M Smith tor 2 Ann M Smith				Case number (if known)
Par	Report About Any Bu	ısinesses	You Own	as a Sole Proprie	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	er, Street, City, Sta	ate & ZIP Code
	it to this petition.		Check	the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as o	defined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the abov	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadline operation	s. If you in	dicate that you are ow statement, and	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am n	ot filing under Chap	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fil Code.	ing under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	4: Report if You Own or	Have An	v Hazardo	us Property or An	ny Property That Needs Immediate Attention
14.	Do you own or have any	■ No.	<u></u>	. ,	
	property that poses or is alleged to pose a threat	☐ Yes.			
	of imminent and identifiable hazard to public health or safety?	□ res.	What is t	ne hazard?	
	Or do you own any property that needs immediate attention?			ate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
	•				Number, Street, City, State & Zip Code

Debtor 1 Todd M Smith
Debtor 2 Ann M Smith

Case number (if known)

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days

I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

## Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

## □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 tor 2	Todd M Smith Ann M Smith				Case nu	umber (if known)	
Pari	t 6:	Answer These Questi	ons for Rep	orting Purposes				
	Wha	t kind of debts do have?	16a. <b>A</b>	re your debts primarily consur ndividual primarily for a personal,			e defined in 11 U.S.C	E. § 101(8) as "incurred by an
				☐ No. Go to line 16b.				
			•	Yes. Go to line 17.				
				are your debts primarily busine noney for a business or investment				
				No. Go to line 16c.				
				Yes. Go to line 17.				
			16c. S	tate the type of debts you owe th	at are not consur	ner debts or bus	siness debts	
17.		you filing under oter 7?	■ No.	am not filing under Chapter 7. Go	to line 18.			
	after	ou estimate that any exempt erty is excluded and		am filing under Chapter 7. Do you re paid that funds will be availabl				and administrative expenses
	admi	inistrative expenses		□No				
	be a	oaid that funds will vailable for		☐ Yes				
		ibution to unsecured itors?						
18.		many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		<b>1</b> 25,001	1-50,000
	you o	estimate that you ?	□ 50-99		☐ 5001-10,000		☐ 50,001	
			□ 100-199 □ 200-999		□ 10,001-25,0	00	☐ More t	han100,000
19.		much do you	□ \$0 - \$50	,000	□ \$1,000,001 ·	- \$10 million	□ \$500,0	000,001 - \$1 billion
		nate your assets to orth?		- \$100,000	\$10,000,001			0,000,001 - \$10 billion
				1 - \$500,000 1 - \$1 million	□ \$50,000,001 □ \$100,000,00			00,000,001 - \$50 billion han \$50 billion
20.		much do you	□ \$0 - \$50	,000	□ \$1,000,001 ·	- \$10 million	□ \$500,0	000,001 - \$1 billion
	estin	nate your liabilities e?	* /	- \$100,000	\$10,000,001	*	_ ' '	0,000,001 - \$10 billion
				1 - \$500,000 1 - \$1 million	□ \$50,000,001 □ \$100,000,00			00,000,001 - \$50 billion than \$50 billion
			<b>—</b> \$500,00	1 - \$1 million				
Part		Sign Below						
For	you		I have exan	nined this petition, and I declare u	ınder penalty of p	erjury that the i	information provided	is true and correct.
				osen to file under Chapter 7, I am es Code. I understand the relief a				
				ey represents me and I did not pa I have obtained and read the noti				help me fill out this
			I request re	lief in accordance with the chapte	er of title 11, Unite	ed States Code,	, specified in this pet	ition.
				d making a false statement, conc case can result in fines up to \$25				
			/s/ Todd N			/s/ Ann M Sı		
			Todd M S Signature o			Ann M Smith Signature of D		
			Executed o	n <b>March 3, 2016</b>		Executed on	March 3, 2016	
				MM / DD / YYYY			MM / DD / YYYY	

Debtor 1	Todd M Smith		
Debtor 2	Ann M Smith	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ James	H. Turner	Date	March 3, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
James H.	Turner		
Printed name			
Turner and	d O'Connell		
Firm name			
4701 North	n Front Street		
Harrisburg	g, PA 17110		
Number, Street,	City, State & ZIP Code		
Contact phone	717-232-4551	Email address	pat@turnerandoconnell.com
29928			
Bar number & St	tate		

Fill in this infor	mation to identify your	Casei		
Debtor 1	Todd M Smith First Name	Middle Name	Last Name	-
Debtor 2	Ann M Smith	wilddie Name	Last Maine	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	_
Case number				
(if known)				Check if this is an amended filing
	orm 106Sum of Your Assets	and Liabilities a	nd Certain Statistical Inforn	nation 12/15
nformation. Fill	out all of your schedul	es first; then complete t	e are filing together, both are equally res he information on this form. If you are fili k the box at the top of this page.	
Part 1: Sumr	narize Your Assets			

Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 128,000.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 39,304.15 1c. Copy line 63, Total of all property on Schedule A/B..... 167,304.15 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 103,702.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 53,597.46 Your total liabilities | \$ Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 3,492.79 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 2.472.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,979.32

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clair	n
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

i jen	n this informatio		_					
200		odd M Smith		Name	Last Name			
Deb	or 2	nn M Smith						
(Spou	se, if filing) Fi	irst Name	Middle	Name	Last Name			
Unit	ed States Bankrup	ptcy Court for the	he: MIDDLE DI	ISTRICT OF PEN	NNSYLVANIA			
Cas	e number							☐ Check if this is an amended filing
_	icial Form							
Sc	hedule A	4/B: Pro	operty					12/15
_	you own or have a No. Go to Part 2. Yes. Where is the		itable interest in a	ny residence, bui	lding, land, or similar property?	?		
	Too. Whole is the	property?						
1.1	608 N Market Street address, if avail	Street	iption	Single-fa	operty? Check all that apply amily home or multi-unit building inium or cooperative	the amoun	t of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
1.1	<b>608 N Market</b> Street address, if avail	<b>Street</b> lable, or other descr	_	Single-fa	amily home or multi-unit building	Current va	t of any secure Who Have Clair alue of the	d claims on Schedule D: ms Secured by Property.  Current value of the
1.1	608 N Market	Street	iption	Single-fa Duplex of Condom Manufac	amily home or multi-unit building inium or cooperative stured or mobile home	Current va	t of any secure Who Have Clair alue of the	d claims on Schedule D: ns Secured by Property.
1.1	608 N Market Street address, if avail	Street lable, or other descr	17045-0000	Single-fa Duplex of Condom Manufac	amily home or multi-unit building inium or cooperative stured or mobile home	Current vaentire pro	t of any secure Who Have Clair alue of the perty? 28,000.00	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$128,000.00
1.1	608 N Market Street address, if avail	Street lable, or other descr	17045-0000	Single-fa Duplex of Condom Manufac Land Investme Timesha	amily home or multi-unit building inium or cooperative stured or mobile home ent property	Current va entire pro  \$1.  Describe (such as f	t of any secure. Who Have Clair alue of the perty? 28,000.00 the nature of y ee simple, ten	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?
1.1	608 N Market Street address, if avail	Street lable, or other descr	17045-0000	Single-fa Duplex of Condom Manufac Land Investme Timesha Other Who has an income	amily home or multi-unit building inium or cooperative stured or mobile home ent property are terest in the property? Check one	Current va entire pro \$1.  Describe (such as f a life estate)	t of any secure. Who Have Clair alue of the perty? 28,000.00 the nature of y ee simple, tens te), if known.	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own? \$128,000.00  our ownership interest
1.1	608 N Market : Street address, if avail  Liverpool City	Street lable, or other descr	17045-0000	Single-fa Duplex of Condom Manufact Land Investme Timesha Other Who has an int	amily home or multi-unit building inium or cooperative etured or mobile home ent property ure terest in the property? Check one only	Current va entire pro  \$1.  Describe (such as f	t of any secure. Who Have Clair alue of the perty? 28,000.00 the nature of y ee simple, tens te), if known.	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own? \$128,000.00  our ownership interest
1.1	608 N Market Street address, if avail	Street lable, or other descr	17045-0000	Single-fa Duplex of Condom Manufact Land Investme Timesha Other Who has an int Debtor 1	amily home or multi-unit building inium or cooperative stured or mobile home ent property are terest in the property? Check one only	Current vaentire pro \$12  Describe (such as f a life estar	t of any secure. Who Have Clair alue of the perty? 28,000.00 the nature of y ee simple, tente), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$128,000.00  our ownership interest ancy by the entireties, or
1.1	608 N Market Street address, if avail	Street lable, or other descr	17045-0000	Single-fa Duplex of Condom Manufac Land Investme Timesha Other Who has an int Debtor 1	amily home or multi-unit building inium or cooperative etured or mobile home ent property ure terest in the property? Check one only	Current varieties pro \$1.  Describe (such as f a life estar Fee Sim	t of any secure. Who Have Clair alue of the perty? 28,000.00 the nature of y ee simple, tente), if known.	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own? \$128,000.00  our ownership interest
1.1	608 N Market Street address, if avail	Street lable, or other descr	17045-0000	Single-fa Duplex of Condom Manufac Land Investme Timesha Other Who has an int Debtor 1 Debtor 1 At least Other informat	amily home or multi-unit building inium or cooperative stured or mobile home ent property are terest in the property? Check one only ently and Debtor 2 only	Current vaentire pro \$1.  Describe (such as f a life estar  Fee Sim	t of any secure Who Have Clair  alue of the perty? 28,000.00  the nature of y ee simple, ten- te), if known.  aple  k if this is com structions)	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$128,000.00  our ownership interest ancy by the entireties, or
1.1	608 N Market Street address, if avail	Street lable, or other descr	17045-0000	Single-fa Duplex of Condom Manufac Land Investme Timesha Other Who has an int Debtor 1 Debtor 1 At least Other informat property identi 608 N Marke	amily home or multi-unit building inium or cooperative stured or mobile home ent property are terest in the property? Check one only and Debtor 2 only one of the debtors and another ion you wish to add about this	Current vaentire pro \$12  Describe (such as fa a life estate Fee Sim	t of any secure Who Have Clair  alue of the perty? 28,000.00  the nature of y ee simple, ten- te), if known.  aple  k if this is com structions)	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$128,000.00  our ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

		odd M Smit			Case number (if known)	
3.	Cars, vans	, trucks, tract	ors, sport utility vel	nicles, motorcycles		
	□ No					
	■ Yes					
	_ 103					
3	3.1 Make: Model:	Chevy Malibu		Who has an interest in the property? Check one  Debtor 1 only	the amount of any	cured claims or exemptions. Put a secured claims on Schedule D: the Claims Secured by Property.
	Year:	2011	_	Debtor 2 only	Current value of	the Current value of the
		mate mileage: formation:	100,000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
				☐ Check if this is community property (see instructions)	\$10,000	\$10,000.00
				n for all of your entries from Part 2, includir hat number here		\$10,000.00
Pa	art 3: Descr	ibe Your Perso	nal and Household Ite	ems		
				erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.			urnishings ces, furniture, linens,	china, kitchenware		
			cupboard-\$70; n pots/pans-\$25; t lamps-\$5; tv (3)- (5)-\$5; bed (2)-\$2	0; refrigerator-\$100; freezer-\$50; stove nicrowave-\$25; utensils-\$20; dishes-\$; .oaster-\$5; sofa-\$100; chair-\$50; end to \$300; playstation-\$50; games (15)-\$15 200; night stand-\$10; dresser-\$200; .00; towels-\$10; grill-\$100; lawn mowe	25; able-\$10; i; moves	\$1,875.00
7.	_ '	Televisions ar		eo, stereo, and digital equipment; computers, pedia players, games	orinters, scanners; music c	collections; electronic devices
	■ No □ Yes. De	escribe				
8.	_	Antiques and	figurines; paintings, pons, memorabilia, col	prints, or other artwork; books, pictures, or other	er art objects; stamp, coin	, or baseball card collections;
	■ No □ Yes. De	escribe				
9.		for sports ar Sports, photog musical instru	graphic, exercise, an	d other hobby equipment; bicycles, pool tables	s, golf clubs, skis; canoes	and kayaks; carpentry tools;
	Yes. De	escribe				

	ebtor 1 ebtor 2	Todd M Smit				Case number	(if known)	
	■ No	les: Pistols, rifles	s, shotgur	ns, ammunition,	and related	d equipment		
11.	Clothes Examp □ No		othes, fur	s, leather coats,	designer v	wear, shoes, accessories		
			norma	l clothing				\$200.00
	□ No		welry, cos	stume jewelry, er	ngagemen	nt rings, wedding rings, heirloom jewelry, watche	es, gems, go	old, silver
			Weddi	ng bands, mi	scellane	ous costume jewelry		\$400.00
	Examp ☐ No	rm animals bles: Dogs, cats, blescribe	oirds, hor	ses				
			dog					\$1.00
	■ No □ Yes.	Give specific info	ormation.	 our entries fro	m Part 3, i	ready list, including any health aids you did including any entries for pages you have att	Г	\$2,476.00
Pa	rt 4: Des	scribe Your Financ	cial Assets	s				
Do	you ow	n or have any le	egal or e	quitable interes	st in any o	f the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
	■ No	oles: Money you h		•		a safe deposit box, and on hand when you file	your petitio	n
	Examp  □ No					certificates of deposit; shares in credit unions, be same institution, list each.  Institution name:	rokerage ho	ouses, and other similar
			17.1.	checking		PNC Bank checking		\$500.00
			17.2.	savings		PNC Bank		\$5.00

	ebtor 1 ebtor 2	Todd M Smith Ann M Smith			Case number (if known)	
18.	Exam		ublicly traded stocks estment accounts with bro	okerage firms, money market a	ccounts	
	■ No □ Yes.		Institution or issuer	name:		
19.			and interests in incorp	orated and unincorporated b	usinesses, including an interest in	an LLC, partnership, and
	■ No	venture				
	☐ Yes.	Give specific informa	ation about them Name of entity:		% of ownership:	
20.	Nego	<i>tiable instrument</i> s inclu	ude personal checks, cas	otiable and non-negotiable in shiers' checks, promissory note ansfer to someone by signing o	s, and money orders.	
	☐ Yes.	. Give specific informa	tion about them Issuer name:			
		ment or pension acc ples: Interests in IRA,		403(b), thrift savings accounts,	or other pension or profit-sharing plar	ns
	■ Yes.	List each account sep. T	parately. Type of account:	Institution name:		
				SERS		\$26,022.15
	■ No	ples: Agreements with	landlords, prepaid rent,	public utilities (electric, gas, was	ater), telecommunications companies	, or others
			periodic payment of mone	ey to you, either for life or for a		
	■ No □ Yes.	lssuer	name and description.			
	Interes 26 U.S.	sts in an education IR .C. §§ 530(b)(1), 529A	RA, in an account in a q (b), and 529(b)(1).	jualified ABLE program, or u	nder a qualified state tuition progra	ım.
		Institut	tion name and descriptio	n. Separately file the records o	f any interests.11 U.S.C. § 521(c):	
	■ No	•		other than anything listed in I	ine 1), and rights or powers exerci	sable for your benefit
	☐ Yes.	Give specific informa	ation about them			
	Exam			nd other intellectual property eds from royalties and licensing		
	■ No □ Yes.	Give specific information	ation about them			
27.			other general intangible exclusive licenses, coop		quor licenses, professional licenses	
	☐ Yes.	Give specific informa	ation about them			
M	oney or	property owed to yo	ou?			Current value of the portion you own? Do not deduct secured claims or exemptions.

	ebtor 1 ebtor 2	Todd M Smith Ann M Smith		Case number (if known)	
28.	Tax ref	unds owed to you			
	■ No				
	☐ Yes.	Give specific information about the	m, including whether you already	filed the returns and the tax years	
20	Family	sunnart			
29.	•	• •	v, spousal support, child support, r	naintenance, divorce settlement, property	settlement
	■ No				
	☐ Yes.	Give specific information			
	Examp	mounts someone owes you les: Unpaid wages, disability insur- benefits; unpaid loans you ma		sick pay, vacation pay, workers' compe	nsation, Social Security
	■ No □ Yes.	Give specific information			
		s in insurance policies les: Health, disability, or life insura	nce; health savings account (HSA	); credit, homeowner's, or renter's insurar	nce
	Yes.	Name the insurance company of e			
		Company na	ame:	Beneficiary:	Surrender or refund value:
		Term insu	rance through work		\$1.00
	■ No □ Yes.	ne has died.  Give specific information		made a demand for anymout	
33.		against third parties, whether of les: Accidents, employment disput			
	_	Describe each claim			
34.	Other o	ontingent and unliquidated clair	ms of every nature, including co	unterclaims of the debtor and rights to	set off claims
	■ No				
	☐ Yes.	Describe each claim			
35.	Any fin	ancial assets you did not alread	y list		
	■ No				
	☐ Yes.	Give specific information			
36		ne dollar value of all of your entr rt 4. Write that number here		ntries for pages you have attached	\$26,528.15
Pa	rt 5: Des	cribe Any Business-Related Propert	y You Own or Have an Interest In. Li	st any real estate in Part 1.	
37.	Do you o	wn or have any legal or equitable int	terest in any business-related prope	rty?	
ı	No. Go	to Part 6.			
[	☐ Yes. G	o to line 38.			
Pa	rt 6: Des	cribe Any Farm- and Commercial Fis	shing-Related Property You Own or	Have an Interest In.	
		ou own or have an interest in farmland,			
46.	_ `	own or have any legal or equita Go to Part 7.	ble interest in any farm- or com	mercial fishing-related property?	
	<b>—</b> 110.	JU IU MAIL 1.			

	otor 1 Todd M Smith otor 2 Ann M Smith			Case number (if known)	
	☐ Yes. Go to line 47.				
Part	Describe All Property You Own or Ha	ve an Interest in That You D	id Not List Above		
	Do you have other property of any kind y  Examples: Season tickets, country club me  No  Yes. Give specific information				
	Lawn mowe	r			\$300.00
54.	Add the dollar value of all of your entrie		number here		\$300.00
55.	Part 1: Total real estate, line 2				\$128,000.00
56.	,		\$10,000.00	-	ψ.120,000.00
57.	Part 3: Total personal and household ite	ems, line 15	\$2,476.00		
58.	Part 4: Total financial assets, line 36	_	\$26,528.15		
59.	Part 5: Total business-related property,	line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related p	roperty, line 52	\$0.00		
61.	Part 7: Total other property not listed, li	ne 54 + _	\$300.00		
62.	Total personal property. Add lines 56 thr	ough 61	\$39,304.15	Copy personal property total	\$39,304.15
63.	Total of all property on Schedule A/B. A	dd line 55 + line 62			\$167,304.15

Fill in this inform	ation to identify your	case:		
Debtor 1	Todd M Smith			
	First Name	Middle Name	Last Name	
Debtor 2	Ann M Smith			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number				
(if known)				Check if this is an
				amended filing

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt					
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.			
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)						
	■ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
	608 N Market Street Liverpool, PA 17045 Perry County	\$128,000.00		\$24,298.00	11 U.S.C. § 522(d)(1)		
	608 N Market St, Liverpool Borough House to be surrendered Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit			
	table/chairs-\$100; refrigerator-\$100; freezer-\$50; stove-\$50; corner	\$1,875.00		\$1,875.00	11 U.S.C. § 522(d)(3)		
	cupboard-\$70; microwave-\$25; utensils-\$20; dishes-\$25; pots/pans-\$25; toaster-\$5; sofa-\$100; chair-\$50; end table-\$10; lamps-\$5; tv (3)-\$300; playstation-\$50; games (15)-\$15; moves (5)-\$5 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit			
	normal clothing	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)		
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit			
	Wedding bands, miscellaneous	\$400.00		\$400.00	11 U.S.C. § 522(d)(4)		
	costume jewelry Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit			

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

**Todd M Smith** Debtor 1 Ann M Smith Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B dog 11 U.S.C. § 522(d)(3) \$1.00 \$1.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit checking: PNC Bank checking 11 U.S.C. § 522(d)(5) \$500.00 \$500.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit savings: PNC Bank 11 U.S.C. § 522(d)(5) \$5.00 \$5.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **SERS** 11 U.S.C. § 522(d)(10)(E) \$26,022.15 \$26,022.15 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Term insurance through work 11 U.S.C. § 522(d)(7) \$1.00 \$1.00 Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(3) Lawn mower \$300.00 \$300.00 Line from Schedule A/B: 53.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Official	Form	106C

No

Yes

Fill in	this inform	ation to identify you	ır case:				
Debto	or 1	Todd M Smith					
		First Name	Middle Name	Last Name			
Debto		Ann M Smith					
(Spouse	e if, filing)	First Name	Middle Name	Last Name			
United	d States Bar	kruptcy Court for the:	MIDDLE DISTRICT OF PENNSY	'LVANIA			
Cooo	numbor						
(if know	number					☐ Check	if this is an
							led filing
							-
Offic	cial Form	<u> 106D</u>					
Sch	edule	D: Creditors	Who Have Claims S	ecure	d by Propert	У	12/15
						-	·
			If two married people are filing together out, number the entries, and attach it to				
numbe	r (if known).						
1. Do a	ny creditors	have claims secured by	your property?				
	No. Check	this box and submit the	his form to the court with your other so	chedules. Y	ou have nothing else to	o report on this form.	
	Yes. Fill in	all of the information I	below.				
Part 1	List All	Secured Claims					
	•		more than one secured claim, list the credit	tor congrately	, Column A	Column B	Column C
for eac	ch claim. If mo	ore than one creditor has	a particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
much a	as possible, lis	st the claims in alphabetic	cal order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	Auto Tracl	k	Describe the property that secures the	e claim:	\$0.00	\$10,000.00	\$0.00
	Creditor's Name		2011 Chevy Malibu 100,000 m	iles			
	=		As of the date you file, the claim is: Ch	neck all that			
	342 Fairfie	ild Road /ille, PA 17754	apply.				
_			Contingent				
	Number, Street,	City, State & Zip Code	Unliquidated				
Who	owes the del	ot? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
_	btor 1 only	or oncon one.	☐ An agreement you made (such as mo	ortgage or se	cured		
	btor 2 only		car loan)	origago or oo	odrod		
_	btor 1 and De	htor 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
_		e debtors and another	☐ Judgment lien from a lawsuit				
□сһ	eck if this cla	nim relates to a	Other (including a right to offset)	ar Ioan			
CC	ommunity del	ot					
Date o	debt was incu	rred	Last 4 digits of account numbe	er			
			-				
0.0	Bayview L	oan Servicing					
2.2	LLC		Describe the property that secures the	e claim:	\$103,702.00	\$128,000.00	\$0.00
	Creditor's Name		608 N Market Street Liverpool	l, PA			
			17045 Perry County				
			608 N Market St, Liverpool Bo House to be surrendered	prougn			
	PO Box 65	30001	As of the date you file, the claim is: Ch	neck all that			
		75265-0091	apply.				
-		City, State & Zip Code	☐ Contingent☐ Unliquidated				
		on, orate a zip oode	Disputed				
Who	owes the del	bt? Check one.	Nature of lien. Check all that apply.				
■ De	btor 1 only		☐ An agreement you made (such as mo	ortgage or se	cured		
	btor 2 only		car loan)	-			
	btor 1 and De	btor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
		e debtors and another	☐ Judgment lien from a lawsuit	•			
☐ Ch	eck if this cla	im relates to a	Other (including a right to offset)	/lortgage			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1	Todd M Smith				Case number (if know)	
	First Name	Middle Name	Last Name			
Debtor 2	Ann M Smith					
	First Name	Middle Name	Last Name			
Date debt	was incurred		Last 4 digits of account number	9013		
Add the	dollar value of your e	ntries in Column	A on this page. Write that number h	ere:	\$103,702.0	00
	the last page of your at number here:	form, add the do	llar value totals from all pages.		\$103,702.0	)0

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Fill in this info	rmation to identify your	case:				
Debtor 1	Todd M Smith					
	First Name	Middle Name	Last Name			
Debtor 2	Ann M Smith	Middle Norse	L and Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	Sankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA			
Case number						
(if known)					П	Check if this is an
					_	amended filing
000 : 15	400E/E					
Official For						4044=
Schedule	E/F: Creditors W	ho Have Unsec	ured Claims			12/15
Schedule D: Cred left. Attach the Co name and case n	litors Who Have Claims Sectontinuation Page to this pagumber (if known).	ured by Property. If more s e. If you have no informati	space is needed, copy t	any creditors with partially se the Part you need, fill it out, n do not file that Part. On the to	umber the e	entries in the boxes on the
	All of Your PRIORITY Un					
_ •	itors have priority unsecured	d claims against you?				
No. Go to	Part 2.					
☐ Yes.						
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any cred	itors have nonpriority unsec	ured claims against you?				
☐ No. You h	nave nothing to report in this pa	art. Submit this form to the c	ourt with your other sche	edules.		
Yes.						
unsecured cla	aim, list the creditor separately	/ for each claim. For each cla	aim listed, identify what t	b holds each claim. If a credito ype of claim it is. Do not list clai three nonpriority unsecured cla	ms already i	ncluded in Part 1. If more
						Total claim
4.1 Applie	ed Bank	Last 4 digi	ts of account number	2871		\$230.43
•	rity Creditor's Name					
	ICB Inc ox 51660	When was	the debt incurred?			_
	s, NV 89435					
	Street City State Zlp Code	As of the d	late you file, the claim i	s: Check all that apply		
Who inc	curred the debt? Check one.					
☐ Debt	or 1 only	☐ Conting	ent			
■ Debt	or 2 only	☐ Unliquid	lated			
☐ Debt	or 1 and Debtor 2 only	☐ Dispute	d			
☐ At lea	ast one of the debtors and and	other Type of NC	ONPRIORITY unsecured	l claim:		
☐ Chec	ck if this claim is for a comm					
debt	alm authorities (1000)			ration agreement or divorce tha	t you did no	t
	aim subject to offset?		riority claims	a plane, and ather similar 1.1.		
■ No				g plans, and other similar debts		
☐ Yes		Othor S	Specify Account in	collection		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 7

Best Case Bankruptcy

Debto Debto	r 1 Todd M Smith r 2 Ann M Smith		Case number (if know)	
4.2	Capital One	Last 4 digits of account number	8519	\$567.98
	Nonpriority Creditor's Name PO Box 71083 Charlotte, NC 28272-1083	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	_	☐ Student loans	a dam.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify credit card		
4.3	Capital One Bank  Nonpriority Creditor's Name	Last 4 digits of account number	2752	\$2,362.35
	c/o Portfolio Recovery 120 Corporate Blvd., Suite 1 Norfolk, VA 23502	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify Account in		
4.4	Discover	Last 4 digits of account number	6549	\$5,105.69
	Nonpriority Creditor's Name PO Box 6103	When was the debt incurred?		
	Carol Stream, IL 60197-6103  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	, o, o a o , o, o c	is. oncon an anatappi,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	

■ No □ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify credit card

Page 2 of 7

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

	or 1 Todd M Smith or 2 Ann M Smith	Case number (if know)	
4.5	Dish Network	Last 4 digits of account number 1274	\$578.09
	Nonpriority Creditor's Name c/o Alliedinterstate Dept 0063	When was the debt incurred?	
	Palatine, IL 60055-0063	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Account in collection	
4.6	HSBC Retail Services/Best Buy	Last 4 digits of account number 0881	\$2,547.10
	Nonpriority Creditor's Name PO Box 17298 Baltimore, MD 21297-1298	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	_	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card	
4.7	Lowes	Last 4 digits of account number 5485	\$742.45
	Nonpriority Creditor's Name		Ψ1 42.40
	PO Box 530914	When was the debt incurred?	
	Atlanta, GA 30353-0914		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Пол	
		Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify credit card	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 7

	or 1 TOOO M Smith	Case number (if know)	
4.8	PNC Bank	Last 4 digits of account number 0652	\$784.42
	Nonpriority Creditor's Name 2730 Liberty Avenue Pittsburgh, PA 15222	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify  Overdraft	
4.9	PP&L	Last 4 digits of account number	\$2,233.47
	Nonpriority Creditor's Name  2 North 9th Street	When was the debt incurred?	
	CPC-GENN1		
	Allentown, PA 18101-1175		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Utility	
4.1			
0	PSECU Nonpriority Creditor's Name	Last 4 digits of account number XXXX	\$13,504.63
	PO Box 67013 Harrisburg, PA 17106-7013	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other, Specify PSL Ioan	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 7

	1 Todd M Smith 2 Ann M Smith	Case number (if know)	
4.1	PSECU		00,000
1	Nonpriority Creditor's Name	Last 4 digits of account number	\$6,000.00
	PO Box 67013	When was the debt incurred?	
	Harrisburg, PA 17106-7013		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Deficiency on car	
4.1	PSECU Visa	Last 4 digits of account number XXXX	\$6,501.68
2	Nonpriority Creditor's Name	Last 4 digits of account number	Ψο,σοποσ
	P O Box 67013	When was the debt incurred?	
	Harrisburg, PA 17106		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card	
4.1	Decister Charmelet Inc	2272	<b>¢</b> 507.50
3	Register Chevrolet Inc.	Last 4 digits of account number	\$507.50
	Nonpriority Creditor's Name PO Box 128	When was the debt incurred?	
	Thompsontown, PA 17094		
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Account

Page 5 of 7

Debto Debto	r 1 Todd M Smith r 2 Ann M Smith		Case number (if know)	
4.1	Robert C. Martin	Last 4 digits of account number	0322	\$10,827.83
	Nonpriority Creditor's Name c/o Evan Pappas, Esq PO Box 88 Harrisburg, PA 17108	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Judgement	<u>:                                      </u>	
4.1 5	T-Mobile  Nonpriority Creditor's Name	Last 4 digits of account number	4802	\$1,063.48
	c/o AFNI PO Box 3427	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Account in	collection	
4.1 6	TCI Long Distance  Nonpriority Creditor's Name	Last 4 digits of account number	0160	\$40.36
	PO Box 9269 Uniondale, NY 11555	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Telephone	service	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1	Todd M Smith	
Debtor 2	Ann M Smith	Case number (if know)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	0	Φ.	0.00
	6h.	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ \$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	Ψ	
	Oi.	here.	Oi.	\$	53,597.46
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	53,597.46

Fill in this infor	mation to identify your	case:		
Debtor 1	Todd M Smith			
	First Name	Middle Name	Last Name	
Debtor 2	Ann M Smith			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in thi	s information to identify your	case:		
Debtor 1	Todd M Smith	Middle News	LeatMenne	
Debtor 2	First Name  Ann M Smith	Middle Name	Last Name	
(Spouse if, fi		Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case num	nber			
(if known)		_		☐ Check if this is an amended filing
Officia	J Form 106U			
	al Form 106H	lahtana		
<u>scne</u>	dule H: Your Cod	eptors		12/15
1. Do	,		, do not list either spouse as a cod	ebtor.
■ No				
			property state or territory? (Computer Rico, Texas, Washington, ar	nunity property states and territories include d Wisconsin.)
	o. Go to line 3.			
⊔ Ye	es. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?	
in lin Form	e 2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make sure you	pouse is filing with you. List the person shown have listed the creditor on Schedule D (Official Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IIP Code		umn 2: <b>The creditor to whom you owe the debt</b> ck all schedules that apply:
3.1				
0			Пя	chedule D. line
	Name			chedule D, line
	Name			schedule D, line schedule E/F, line schedule G, line
	Number Street City	State		chedule E/F, line
	Number Street	State		chedule E/F, line
3.2	Number Street	State	ZIP Code	schedule E/F, line
3.2	Number Street	State	ZIP Code	chedule E/F, line
3.2	Number Street City	State	ZIP Code	schedule E/F, line
3.2	Number Street City	State	ZIP Code	schedule E/F, line

Schedule H: Your Codebtors

Eill	in this information to identify your	0000				I			
	btor 1 Todd M Sm								
1	btor 2  ouse, if filing)  Ann M Smi	th			_				
Uni	ited States Bankruptcy Court for th	e: MIDDLE DISTRICT C	F PENNSYLVANIA						
	se number nown)		-			Check if this is:  An amende  A suppleme  13 income a	nt showi	ng postpetition following date:	
	fficial Form 106l					MM / DD/ Y	YYY		
S	chedule I: Your Inc	come							12/15
spo atta	plying correct information. If you see. If you are separated and youch a separate sheet to this form  The separate sheet to this for	our spouse is not filing w . On the top of any additi	ith you, do not inclu onal pages, write yo	de infor	mati	on about your spo I case number (if I	use. If m	nore space is Answer every	needed,
	information.			Debtor 1			Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>			_ `	<ul><li>■ Employed</li><li>□ Not employed</li></ul>		
	employers.	Occupation	<b>Duty Officer</b>	Homem	Homemaker				
	Include part-time, seasonal, or self-employed work.	Employer's name	PA Turnpike Co	mmiss	ion				
	Occupation may include student or homemaker, if it applies.	Employer's address	Middletown, PA	<b>\</b>					
		How long employed t	here? <u>10 year</u>	's					
Pai	rt 2: Give Details About Mo	onthly Income							
	imate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, write \$0 in the	space. Ir	nclude your noi	n-filing
	ou or your non-filing spouse have n e space, attach a separate sheet t		ombine the informatio	n for all e	emplo	oyers for that perso	n on the	lines below. If	you need
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	5,890.65	\$	0.00	
3.	Estimate and list monthly over	rtime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	5,890.65	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

				For I	Debtor 1		Debtor 2 or filing spouse
	Сору	r line 4 here	4.	\$	5,890.65	\$	0.00
5.	List a	all payroll deductions:					
-	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,234.89	\$	0.00
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
	5e.	Insurance	5e.	\$	0.00	\$	0.00
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00
	5g.	Union dues	5g.	\$	0.00	\$	0.00
	5h.	Other deductions. Specify: Sers	5h	+ \$	368.05	- \$	0.00
		Garnishment	_	\$	883.59	\$	0.00
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,486.53	\$	0.00
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,404.12	\$	0.00
8.	List a 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00
	8b.	Interest and dividends	8b.	\$ 	0.00	\$	0.00
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		<u> </u>		·	
	8d.	Unemployment compensation	8c. 8d.	\$	0.00	\$	0.00
	ou. 8e.	Social Security	8e.	\$ 	0.00	\$ 	0.00
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:		\$	0.00	\$	0.00
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00
	8h.	Other monthly income. Specify: Income tax refund	8h	+ \$	88.67	+ \$	0.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	88.67	\$	0.00
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	+ \$_		0.00 = \$ 3,492.79
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not ify:	deper		,		chedule J. 11. +\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 3,492.79 Combined
13.	Do yo	ou expect an increase or decrease within the year after you file this form  No.  Yes. Explain:	?				monthly income

Fill i	n this informa	ation to identify yo	our case:						
Debt		Todd M Smit				Ch	eck	if this is:	
					_			n amended filing	
Debt (Spo	or 2 use, if filing)	Ann M Smith	1						ving postpetition chapter the following date:
Unite	ed States Bank	ruptcy Court for the:	: MIDDLE	E DISTRICT OF PENNSY	LVANIA		N	MM / DD / YYYY	
	e number lown)								
Of	ficial Fo	orm 106J							
Sc	hedule	J: Your l	Exper	ses					12/1
Be a info	as complete rmation. If m nber (if know	and accurate as nore space is ne n). Answer ever	possible. eded, atta ry question	If two married people and the control of the contro					
Part 1.	1: Desci	ribe Your House	hold						
١.	□ No. Go to								
		es Debtor 2 live i	in a separ	ate household?					
	■ N	lo	·	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	ebto	r 2.	
2.	Do you hay	e dependents?	□ No						
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state dependents				daughter			15	□ No ■ Yes
					son			17	□ No ■ Yes
					son			3-1/2	□ No ■ Yes
									□ No □ Yes
3.	expenses of	penses include of people other the d your depende	han $_{\square}$	No Yes					
exp	mate your ex	a date after the k	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the		h assistance and		government assistance i luded it on <i>Schedule I:</i> \				Your exp	enses
4.		or home owners		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$		0.00
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
	•	erty, homeowner's				4b.			0.00
				upkeep expenses		4c.			0.00
5.		eowner's associat mortgage payme		oominium dues our residence, such as ho	me equity loans	4d. 5.			0.00 0.00

Official Form 106J Schedule J: Your Expenses page 1

Debtor 1 Debtor 2	Todd M Smith Ann M Smith	Case num	ber (if known)	
CDIOI Z	Allii M Silliti	Case Hulli	ber (ii kriowii)	
. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	230.00
6b.	Water, sewer, garbage collection	6b.	\$	125.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	195.00
6d.	Other. Specify: Cable	6d.	\$	80.00
. Foo	d and housekeeping supplies	7.	\$	250.00
. Chi	dcare and children's education costs	8.	\$	0.00
. Clo	thing, laundry, and dry cleaning	9.	\$	50.00
o. Per	sonal care products and services	10.	\$	0.00
1. Med	lical and dental expenses	11.	\$	10.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	120.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ritable contributions and religious donations	14.	\$	0.00
	irance.		·	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
15c	Vehicle insurance	15c.	\$	94.00
15d	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify:	 16.	\$	0.00
	allment or lease payments:		<u> </u>	0.00
	Car payments for Vehicle 1	17a.	\$	380.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify:		\$	0.00
	Other. Specify:	17d.	· -	0.00
. You	r payments of alimony, maintenance, and support that you did not report a ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I)	as	\$	938.00
	er payments you make to support others who do not live with you.	,.	\$	0.00
	cify:	19.		0.00
	er real property expenses not included in lines 4 or 5 of this form or on Sci		our Income.	
	Mortgages on other property	20a.		0.00
20b	. Real estate taxes	20b.	\$	0.00
20c	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
	er: Specify:	21.	·	0.00
				3.33
	culate your monthly expenses			
	. Add lines 4 through 21.		\$	2,472.00
22b	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c	Add line 22a and 22b. The result is your monthly expenses.		\$	2,472.00
	culate your monthly net income.			
23a	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,492.79
23b	Copy your monthly expenses from line 22c above.	23b.	-\$	2,472.00
23c	Subtract your monthly expenses from your monthly income.	23c.	\$	1,020.79
	The result is your monthly net income.	230.	Ψ	1,020.73
For o	you expect an increase or decrease in your expenses within the year after pexample, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?			se or decrease because of a
<b>I</b>				
	'es. Explain here:			

Fill in this infor	mation to identify your	case.				ĺ
Debtor 1	Todd M Smith	case.				
DCDIOI 1	First Name	Middle Name	Las	t Name		
Debtor 2	Ann M Smith					
(Spouse if, filing)	First Name	Middle Name	Las	t Name		
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF PEN	INSYLV	ANIA		
Case number						
(if known)						☐ Check if this is an
						amended filing
ou must file the	is form whenever you fi	n connection with a bankrup	amende	ed sche	edules. Making a false stat	tement, concealing property, or 00, or imprisonment for up to 20
Sig	n Below					
Did you pa	ay or agree to pay some	one who is NOT an attorney	to help	you fil	l out bankruptcy forms?	
■ No						
☐ Yes.	Name of person					nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
•	alty of perjury, I declare re true and correct.	that I have read the summar	y and s	chedul	es filed with this declarati	ion and
X /s/ Too	dd M Smith		Х	/s/ Ar	nn M Smith	
	M Smith		-		VI Smith	
	ire of Debtor 1			Signat	ture of Debtor 2	
Date	March 3, 2016			Date	March 3, 2016	
_	,		-			

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

Fill in	this inforn	nation to identify you	r case:			
Debtor		Todd M Smith				
Dobtoi	•	First Name	Middle Name	Last Name		
Debtor (Spouse	_	Ann M Smith First Name	Middle Name	Last Name		
United	States Bai	nkruptcy Court for the:	MIDDLE DISTRICT OF P	ENNSYLVANIA		
Case r	number _				_	heck if this is an mended filing
State Be as coinforma	ement complete a	nd accurate as possi	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for supp additional pages, write you	
Part 1			rital Status and Where You	Lived Before		
1. W	Married	r current marital statu	is?			
■ □		t all of the places you l	ived in the last 3 years. Do not pates Debtor 1	ot include where you live now  Debtor 2 Prior Ad		Dates Debtor 2
					ity property state or territory co, Texas, Washington and W	
□ Part 2		ike sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	fficial Form 106H).		
<b>4. Di</b> Fil	d you have Il in the tota you are filin	e any income from en al amount of income yo		all businesses, including part-		ndar years?
_	I CO. FIII	iii uie uetalis.				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	st calenda ary 1 to De	r year: cember 31, 2015)	■ Wages, commissions, bonuses, tips	\$61,546.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

		Debtor 1			Debtor 2				
		Sources of income Check all that apply.			Check all that apply. (be		Gross income (before deductions and exclusions)		
		■ Wages, commissions bonuses, tips	mmissions, \$60,551.00		☐ Wages, con bonuses, tips	☐ Wages, commissions, bonuses, tips			
				☐ Operating a business	S		☐ Operating a	business	
5.	Include include and other winnings.  List each s	come regard public benefi If you are filin	ess of wheth t payments; ng a joint cas ne gross inco	e during this year or the er that income is taxable. pensions; rental income; i ee and you have income the eme from each source sep	Examples of interest; dividend the contract of	f other income are dends; money colle ved together, list it	alimony; child suppected from lawsuits; only once under D	; royalties; an ebtor 1.	
				Debtor 1 Sources of income Describe below	(befo	s income re deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: List	Certain Pay	ments You	Made Before You Filed	for Bankrup	otcy			
).	No.	Neither De individual puring the No. Yes  * Subject to Debtor 1 or	btor 1 nor D rimarily for a 90 days befor Go to line 7 List below of paid that created not include o adjustment	ebtor 2 has primarily consulebtor 2 has primarily copersonal, family, or house the you filed for bankruptor.  each creditor to whom you editor. Do not include pay payments to an attorney for an 4/01/16 and every 3 your both have primarily coper you filed for bankruptor.	onsumer del ehold purpos y, did you pa I paid a total ments for do for this bank years after the	ots. Consumer deb se."  by any creditor a tot of \$6,225* or more imestic support obli- ruptcy case. at for cases filed on ots.	e in one or more pa igations, such as control or after the date of	ore? yments and t hild support a of adjustment	he total amount you and alimony. Also, do
		Ü	,	, , , , , , , , , , , , , , , , , , , ,	y, ala you po	y arry creditor a tol	ar or \$000 or more		
		□ No. ■ Yes	include pay	each creditor to whom you ments for domestic suppo this bankruptcy case.					
	Creditor'	s Name and	Address	Dates of pay	yment	Total amount	Amount you	Was this	payment for
						paid	still owe		-
Auto Track 342 Fairfield Road Montoursville, PA 17754			Monthly		\$1,140.00	\$0.00	☐ Mortga ☐ Car ☐ Credit ( ☐ Loan R ☐ Supplie ☐ Other_	Card epayment ers or vendors	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor Debtor			Cas	e number (if known)		
<i>Ins</i> of a b	ithin 1 year before you filed for bankrupto siders include your relatives; any general pa which you are an officer, director, person in ousiness you operate as a sole proprietor. 1 mony.	ortners; relatives of any ger control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	No Yes. List all payments to an insider					
In	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
ins	ithin 1 year before you filed for bankrupto sider? clude payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	No					
□ In	Yes. List all payments to an insider nsider's Name and Address	Dates of payment	Total amount	Amount you		this payment
Part 4:	Identify Legal Actions, Repossession	ne and Forcelosures	paid	still owe	Include cred	itor's name
mo	st all such matters, including personal injury odifications, and contract disputes.  No Yes. Fill in the details.  Fase title  Fase number	cases, small claims action	Court or agency		Status of the case	
R	cobert C. Martin, Jr.	Civil	Court of Comm Perry County,		■ Pending □ On appeal □ Concluded	
v T	ayview Ltd odd M. Smith cV-ML-2015-1184	Foreclosure	Court of Comn Perry County,		■ Pending □ On appeal □ Concluded	
Ch ■	ithin 1 year before you filed for bankruptoneck all that apply and fill in the details below  No  Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?  Value of the property
		Explain what happened	d			ргоролту
ac ■ □		ause you owed a debt?	ū		n, set off any a	,
С	reditor Name and Address	Describe the action the	cribe the action the creditor took			Amount
	ithin 1 year before you filed for bankrupto ourt-appointed receiver, a custodian, or a No Yes		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

	otor 1 otor 2	Ann M Smith			Case number (	if known)	
Par	t 5:	List Certain Gifts and Contributio	ns				
13.	<b>I</b>	n 2 years before you filed for bank No Yes. Fill in the details for each gift.	ruptcy, d	id you give any gifts with a total va	alue of more th	nan \$600 per persoi	1?
		s with a total value of more than \$6 person	600	Describe the gifts		Dates you gave the gifts	Value
	Pers Addr	on to Whom You Gave the Gift and ress:	d				
14.	<b>I</b>	n 2 years before you filed for bank No Yes. Fill in the details for each gift or		d you give any gifts or contributio	ns with a total	l value of more than	n \$600 to any charity
	Gifts more Char	s or contributions to charities that e than \$600 rity's Name ress (Number, Street, City, State and ZIP Cod	total	Describe what you contributed		Dates you contributed	Value
Par	t 6:	List Certain Losses					
15.	or ga	n 1 year before you filed for bankr mbling? No Yes. Fill in the details.	uptcy or s	since you filed for bankruptcy, did	you lose anytl	hing because of the	eft, fire, other disaster
	Desc	cribe the property you lost and the loss occurred	Include	the amount that insurance has paid. the claims on line 33 of Schedule A/B.	List pending	Date of your loss	Value of property lost
16.	Includ	ulted about seeking bankruptcy or	preparin	I you or anyone else acting on you g a bankruptcy petition? , or credit counseling agencies for se			
	Addr Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not	You	Description and value of any propertransferred	perty	Date payment or transfer was made	Amount of payment
17.	Do no		editors or	I you or anyone else acting on you to make payments to your credito d on line 16.		r transfer any prop	erty to anyone who
		on Who Was Paid		Description and value of any propertransferred	perty	Date payment or transfer was made	Amount of payment
18.	Includinclud	ferred in the ordinary course of yo de both outright transfers and transfel de gifts and transfers that you have al No	our busine rs made a	s security (such as the granting of a s			
		Yes. Fill in the details. on Who Received Transfer ress		Description and value of property transferred	payments	any property or received or debts	Date transfer was made
	Pers	on's relationship to you			paid in exc	change	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Best Case Bankruptcy

19.	<ul> <li>9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>						
	Name of trust	Description and	value of the prop	perty trans	sferred	Date Transfer was made	
Par	List of Certain Financial Accounts, Instr	ruments, Safe Depos	it Boxes, and St	orage Unit	s		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or	•					
	houses, pension funds, cooperatives, associa  No  Yes. Fill in the details.	ations, and other fina	ncial institution	s. ·			
	Name of Financial Institution and	Last 4 digits of account number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed fo	r bankruptcy, ar	ny safe de <sub>l</sub>	oosit box or other depo	sitory for securities,	
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than you	r home within 1	year befor	re you filed for bankrup	tcy	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	9: Identify Property You Hold or Control for	or Someone Else					
23.	Do you hold or control any property that some for someone.	eone else owns? Inc	lude any propert	ty you bor	rowed from, are storing	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value	
Par	Part 10: Give Details About Environmental Information						
For	he purpose of Part 10, the following definition	ns apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	•	environmental l	aw, wheth	er you now own, operat	te, or utilize it or used	
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, o		as a hazardous	waste, ha	zardous substance, tox	ic substance,	
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.						

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Official Form 107

Best Case Bankruptcy

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environme	ental law?				
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	y release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admin	istrative proceeding under any envi	ronmental law? Include settlements a	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Co	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have an	y of the following connections to any	business?				
	☐ A sole proprietor or self-employed in a	A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability compan	y (LLC) or limited liability partnershi	p (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing execu	utive of a corporation						
	☐ An owner of at least 5% of the voting o	r equity securities of a corporation						
	■ No. None of the above applies. Go to Part	t 12.						
	Yes. Check all that apply above and fill in	the details below for each business	-					
	Business Name D Address	escribe the nature of the business	Employer Identification number					
	110000	ame of accountant or bookkeeper	Dates business existed	number of ITIN.				
28.	28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No							
	Yes. Fill in the details below.	ate Issued						
	Name Address (Number, Street, City, State and ZIP Code)	ate เรอนชน						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Todd M Smith		
Debtor 2	Ann M Smith		Case number (if known)
Part 12:	Sign Below		
are true a with a bar	nd correct. I understand that maki	ng a false statement	nd any attachments, and I declare under penalty of perjury that the answers concealing property, or obtaining money or property by fraud in connection prisonment for up to 20 years, or both.
/s/ Todd	I M Smith	/s/ An	n M Smith
Todd M	Smith	Ann N	// Smith
Signatur	e of Debtor 1	Signat	ture of Debtor 2
Date M	larch 3, 2016	Date	March 3, 2016
Did you a	ttach additional pages to Your Sta	tement of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you p	ay or agree to pay someone who i	s not an attorney to I	help you fill out bankruptcy forms?
■ No			
☐ Yes. Na	ame of Person Attach the Ba	ankruptcy Petition Prep	parer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this information to identify your case:					
Debtor 1	Todd M Smith				
Debtor 2 Ann M Smith (Spouse, if filing)					
United States Bankruptcy Court for the: Middle District of Pennsylvania					
Case number					

Check as directed in lines 17 and 21:							
	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Calculate Your Average Monthly Income Part 1: 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 5,890.65 0.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Part 2: Determine How to Measure Your Deductions from Income    Total average monthly income from Income				Column A Debtor 1		Column B Debtor 2 non-filing	or	
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you \$ 0.00  For your spouse \$ 0.00  9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  Income Tax refund \$ 8.86.7 \$ 0.00  Income Tax refund \$ 8.86.7 \$ 0.00  Total amounts from separate pages, if any.  11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  12. Capuy your total average monthly income from line 11.  13. Calculate the marital adjustment. Check one:  14. You are married and your spouse is filling with you.  15. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  14. Your current monthly income. Subtract line 13 from line 12.  15. Calculate your curre	7.	Interest, dividends, and royalties		\$	0.00	\$	0.00	
the Social Security Act. Instead, list it here: For your spouse \$ 0.00 For your spouse \$ 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.    Income Tax refund	8.	Unemployment compensation		\$	0.00	\$	0.00	
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.    Income Tax refund			efit unde	er				
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received a arctime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.    Income Tax refund			.00					
benefit under the Social Security Act.  10. Incrome from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.  Income Tax refund  Sa8.67 \$0.00  Total amounts from separate pages, if any.  11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  So.979.32 + \$0.00 \$0.00  Total average monthly income from line 11.  Calculate the marital adjustment. Check one:  You are not married. Fill in 0 below.  You are married and your spouse is filing with you.  Fill in the amount of the income listed in line 11. Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustment does not apply, enter 0 below.  Solution of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.  Solution of the spouse's support of someone other than you or your dependents. Solution of the spouse's support of someone other than you or your dependents. Solution of the spouse's support of someone other than you or your dependents. Solution of the spouse's support of someone other than you or your dependents. Solution of the spouse's support of someone other than you or your dependents. Solution of the spouse's support of someone other than you or your dependent		For your spouse\$	.00					
Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.    Income Tax refund	9.		as a	\$	0.00	\$	0.00	
Total amounts from separate pages, if any.  11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  12. Copy your total average monthly income from line 11.  13. Calculate the marital adjustment. Check one:    You are married and your spouse is filling with you. Fill in 0 below.   You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents on a separate page.  If this adjustment does not apply, enter 0 below.    Your current monthly income. Subtract line 13 from line 12.  14. Your current monthly income. Subtract line 13 from line 12.    \$ 0.00   Copy here=>	10.	Do not include any benefits received under the Social Security Act or paymereceived as a victim of a war crime, a crime against humanity, or internation domestic terrorism. If necessary, list other sources on a separate page and	ents al or					
Total amounts from separate pages, if any.  11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  12. Copy your total average monthly income from line 11.  13. Calculate the marital adjustment. Check one:  14. You are married and your spouse is not filing with you. Fill in 0 below.  15. Selow, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustment does not apply, enter 0 below.  16. Total  17. Calculate the married and your spouse is not filing with you. Fill in 0 below.  18. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  14. Your current monthly income. Subtract line 13 from line 12.  15. Calculate your current monthly income for the year. Follow these steps:  15a. Copy line 14 here=>  S. 5,979.32  Multiply line 15a by 12 (the number of months in a year).		Income Tax refund		\$	88.67	\$	0.00	
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.    S,979.32				\$	0.00	\$	0.00	
each column. Then add the Total for Column A to the total for Column B.  \$ 5,979.32		Total amounts from separate pages, if any.	-	<b>.</b> \$	0.00	\$	0.00	
Part 2: Determine How to Measure Your Deductions from Income  12. Copy your total average monthly income from line 11. \$5,979.32  13. Calculate the marital adjustment. Check one:    You are not married. Fill in 0 below.   You are married and your spouse is filing with you. Fill in 0 below.   Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below.   S	11.		\$	5,979.32	+ \$ _	0.00	= \$	5,979.32
13. Calculate the marital adjustment. Check one:  You are not married. Fill in 0 below.  You are married and your spouse is filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.  Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.  \$ \$  Total  Total  \$  0.00  Copy here⇒  0.1  \$  5,979.32   S  Multiply line 15a by 12 (the number of months in a year).  \$  x 12	Part	2: Determine How to Measure Your Deductions from Income						
13. Calculate the marital adjustment. Check one:  You are not married. Fill in 0 below.  You are married and your spouse is filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.  Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.  \$ \$  Total  Total  \$  0.00  Copy here⇒  0.1  \$  5,979.32   S  Multiply line 15a by 12 (the number of months in a year).  \$  x 12	12.	Copy your total average monthly income from line 11.					\$	5,979.32
You are married and your spouse is filing with you.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.  Total  Total  \$ 0.00  Copy here=>  5,979.32  14. Your current monthly income. Subtract line 13 from line 12.  \$ 5,979.32  Multiply line 15a by 12 (the number of months in a year).	13.	Calculate the marital adjustment. Check one:						
You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. \$		☐ You are not married. Fill in 0 below.						
Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.  Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.  \$		You are married and your spouse is filing with you. Fill in 0 below.						
dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.  Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.  Sharp and the amount of income devoted to each purpose. If necessary, list additional adjustment does not apply, enter 0 below.  Sharp and the spouse's support of someone other than you or your dependents.  Sharp and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  Sharp and the spouse's support of someone other than you or your dependents.  Sharp and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  Sharp and the amount of income of the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  Sharp and the spouse and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  Sharp and the spouse and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  Sharp and the spouse and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  Sharp and the spouse and the amount of income for the amoun		· · · · · · · · · · · · · · · · · · ·						
adjustments on a separate page.  If this adjustment does not apply, enter 0 below.  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		dependents, such as payment of the spouse's tax liability or the spouse	s supp	ort of someor	ne other th	an you or yo	ur depend	ents.
Total \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		adjustments on a separate page.	come de	evoted to eac	ch purpose	. If necessar	y, list addi	tional
Total \$ \$ \$ \$ 0.00 Copy here> - 0.1  14. Your current monthly income. Subtract line 13 from line 12. \$ 5,979.32  15. Calculate your current monthly income for the year. Follow these steps:  15a. Copy line 14 here=> \$ 5,979.32  Multiply line 15a by 12 (the number of months in a year). \$ 12		If this adjustment does not apply, enter 0 below.	\$					
Total \$ 0.00 Copy here=> - 0.1  14. Your current monthly income. Subtract line 13 from line 12.  15. Calculate your current monthly income for the year. Follow these steps:  15a. Copy line 14 here=> \$ 5,979.32  Multiply line 15a by 12 (the number of months in a year).								
14. Your current monthly income. Subtract line 13 from line 12.  15. Calculate your current monthly income for the year. Follow these steps:  15a. Copy line 14 here=>  Multiply line 15a by 12 (the number of months in a year).  x 12			+\$					
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15. Calculate your current monthly income for the year. Follow these steps:  15a. Copy line 14 here=>  Multiply line 15a by 12 (the number of months in a year).  x 12		i otal	<b>5</b> _	0.0		ppy nere=>		0.00
15a. Copy line 14 here=>  Multiply line 15a by 12 (the number of months in a year).  x 12	14.	Your current monthly income. Subtract line 13 from line 12.					\$	5,979.32
Multiply line 15a by 12 (the number of months in a year).  x 12	15.						_	5 979 32
24.754.04							\$	3,313.32
15b. The result is your current monthly income for the year for this part of the form		Multiply line 15a by 12 (the number of months in a year).					X	12
		15b. The result is your current monthly income for the year for this part of	the form	າ			\$	71,751.84

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1	Todd M Smith
Debtor 2	Ann M Smith

Case number (if known)	

16	Colo	uloto t	the median family income that applies to ye	Follow those et	200:				
10			the median family income that applies to yo		eps:				
	16a.	Fill in i	the state in which you live.	PA					
	16b.	Fill in	the number of people in your household.	5					
	16c.	Fill in t	the median family income for your state and size	e of household.				\$	94,110.00
			d a list of applicable median income amounts, octions for this form. This list may also be availa						
17			e lines compare?	ole at the bankiup	toy or	onco.			
	17a.		Line 15b is less than or equal to line 16c. On	the top of page 1	of this	form, check box 1, <i>Disposable in</i>	ncome is	not de	etermined under
			11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO						
	17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under 11 U.S.C.</i> § 1325(b)(3). <b>Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).</b> On line 39 of that form, copy your current monthly income from line 14 above.								
Part	3:	Calc	culate Your Commitment Period Under 11 U.	S.C. § 1325(b)(4)					
18.	Copy	your	total average monthly income from line 11	•			. \$_		5,979.32
19.	conte spou	end tha se's in	e marital adjustment if it applies. If you are mat calculating the commitment period under 11 acome, copy the amount from line 13.	U.S.C. § 1325(b)(					
	19a.	If the r	marital adjustment does not apply, fill in 0 on lir	ne 19a.			<b>-</b> \$_		0.00
	19b.	Subtr	act line 19a from line 18.				;	<b></b>	5,979.32
							L		
20.		•	your current monthly income for the year. F	·					5,979.32
	20a.	Сору	line 19b					\$	J,919.32
		Multip	bly by 12 (the number of months in a year).					Х	12
								•	74 754 04
	20b.	The re	esult is your current monthly income for the year	r for this part of th	e forn	1		\$	71,751.84
	200	Conv	the median family income for your state and size	ze of household fr	om lin	e 16c		\$	94,110.00
	200.	Сору	the median ramily income for your state and size	te oi nousenoid in	JIII III I	e 100		Ψ	
	21.	How o	do the lines compare?						
	Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, <i>The commitment period is 3 years</i> . Go to Part 4.								
	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4.								
			<u> </u>						
Part		_	n <b>Below</b> here, under penalty of perjury I declare that the	information on th	ic etat	ement and in any attachments is	true and	corre	rt .
_							irao arro	00110	
X			M Smith Smith	X		nn M Smith  M Smith			
			of Debtor 1			ature of Debtor 2			
Date March 3, 2016					Date	March 3, 2016			
	If voi		/ DD / YYYY  ked 17a, do NOT fill out or file Form 122C-2.			MM/DD/YYYY			
	•		·	s form. On line 30	of the	t form, copy your current monthly	income	from li	ne 14 above
	If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.								

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

C	hapter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### United States Bankruptcy Court Middle District of Pennsylvania

In re	Todd M Smith Ann M Smith		Case No.					
	74m m Gintai	Debtor(s)	Chapter	13				
	DISCLOSURE OF CO.	MPENSATION OF ATTOI	ONEV EOD DE	'PTOD(S)				
				, ,				
co	arsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that empensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
	For legal services, I have agreed to accept		\$	4,000.00				
	Prior to the filing of this statement I have re			0.00				
	Balance Due		\$	4,000.00				
2. Tł	ne source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3. Th	ne source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
<b>4</b> . ■	I have not agreed to share the above-disclose	ed compensation with any other person	unless they are mem	pers and associates	of my law firm.			
	I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.							
5. In	n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
b. c.	Analysis of the debtor's financial situation, ar Preparation and filing of any petition, schedu Representation of the debtor at the meeting o	iles, statement of affairs and plan which	may be required;		nkruptcy;			
d.	[Other provisions as needed]  Negotiations with secured creditor reaffirmation agreements and app 522(f)(2)(A) for avoidance of liens	plications as needed; preparation	emption planning; and filing of moti	preparation and one pursuant to	d filing of 11 USC			
6. By	y agreement with the debtor(s), the above-discless Representation of the debtors in any other adversary proceeding.			es, relief from s	tay actions or			
		CERTIFICATION						
	certify that the foregoing is a complete stateme nkruptcy proceeding.	nt of any agreement or arrangement for	payment to me for re	epresentation of the	e debtor(s) in			
	rch 3, 2016	/s/ James H. Turr						
Dai	te	James H. Turner Signature of Attorne						
		Turner and O'Co	nnell					
		4701 North Front						
		Harrisburg, PA 17 717-232-4551 Fa						
		pat@turnerandoo						
		Name of law firm	<del></del>					

### United States Bankruptcy Court Middle District of Pennsylvania

In re	Ann M Smith	Case No.		
		Debtor(s)	Chapter	13
	VE	RIFICATION OF CREDITOR	MATRIX	
The abo	ove-named Debtors hereby verif	y that the attached list of creditors is true and co	orrect to the best	of their knowledge.
Date:	March 3, 2016	/s/ Todd M Smith		
		Todd M Smith		
		Signature of Debtor		
Date:	March 3, 2016	/s/ Ann M Smith		
		Ann M Smith		
		Signature of Debtor		

**Todd M Smith**